



ALTERNATIVE TO PTO/SB/08a/b (06-03)

Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Application Number	10/041,881
				Filing Date	October 24, 2001
				First Named Inventor	Gary Rasmussen
				Art Unit	2614
				Examiner Name	Wai Yip Lam
Sheet	1	of	6	Attorney Docket Number	577172003200

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Examiner Initials*		Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	<i>Domini Sabatelli</i>	Date Considered	9/6/06
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				Attorney Docket Number	577172003200
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Examiner Signature	<i>Dominic Salsavelli</i>	Date Considered	9/6/06
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		Country Code ² -Number ³ -Kind Code ⁴ (if known)					
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Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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